

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10 651 958

FILING DATE

09-02-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	IND	DEP	
1	/						51								
2		/					52								
3	/						53								
4		/					54								
5		/					55								
6		/					56								
7		/					57								
8		/					58								
9		/					59								
10		/					60								
11		/					61								
12		/					62								
13		/					63								
14		/					64								
15		2					65								
16							66								
17							67								
18							68								
19							69								
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42							92								
43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	2						TOTAL IND.								
TOTAL DEP.	14						TOTAL DEP.								
TOTAL CLAIMS	16						TOTAL CLAIMS								